

## Provider Inspection Summary

For the period 04/01/2003 to 03/31/2006  
Community Based Residential Facility  
CLASS CNA (NONAMBULATORY)

STATE OF WISCONSIN  
Bureau of Quality Assurance  
P.O. Box 2969  
Madison WI 53701-2969

### Facility Information

**Facility Name:** REMEMBRANCE HOME (0009159)

**Address:** 1810 NORTH SPRING STREET, BEAVER DAM, WI 53916

**License Status:** REGULAR

**Licensed/Certified/Registered** 07/01/2001

**Regional Office:** SOUTHERN REGION (MADISON), (608) 243-2370

### Survey History

**Survey ID:** 0094934      **End Date:** 05/24/2005      **Type:** INITIAL      **Purpose:** SURVEY

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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